

Chairman: Pip Gutteridge

Secretary: Ian Macintyre

Treasurer: Carolyn Lewis

Registered Charity No: 507032

BOOKING FORM FOR HIRE OF FACILITIES

Following your enquiry please complete and return to the booking secretary at the address below.

Conditions of hire are available to download from the Website.

When alcohol is to be supplied to the general public, a copy of this form wil be signed by the Designated Premise Supervisor (DPS), Jack Limond, Clun Bars Ltd.

Clun Bars Ltd holds the bar franchise for the Memorial Hall and hirers cannot supply their own alcohol.

Name:			Telephone:				
Address:	dress:			Email:			
Organisation (if Application	able):		-				
Purpose of Hire:							
Person in Charge:		Number Attending	g: (see T&C 11)				
		max. subject to Cov	id legal limits un	til earliest 21st June 2021	l		
Date of Function / Eve	nt:						
Facilites Required:		:	Set Up Time:		Event Time:		
All Areas:	Please note this applies if other		From:		From:		
£20 per hour	the same tim	nall are <u>not</u> usable at e	To:		То:		
Main Sports Hall:	Please note this only applies if other areas of the hall can be used at the same time		From:		From:		
£15 per hour			То:		То:		
Bar Area:			From:		From:		
£10 per hour			To:		To:		
Committee Room:			From:		From:		
£10 per hour			To:		To:		
Kitchen (Teas and		From:		From:			
Coffees): one off payment £5		To:		To:			
Kitchen (catering):			From:		From:		
one off payment £20			To:		To:		
Sizes of tables available:			rectangle	15 of 6 x 4ft		8 of 4 x 2ft	
			round	5 of 5 ft			
Chairs:	Padded and no	on-padded	please do not take padded chairs outside.				
There is an extra £20	charge if you	u require the table	es and chairs t	o be set up for you.			
Cat face.	one hour before and one hour after: FOC						
Set up fees:	additional hours required: £6 per hour						
Extra Rental Items:	Gazebo Water Urn Full Cinema Screen					POA	
	10utdoor Spa	orts Fauinment		1			

Stewards (see T&C 7,8 and 9)

Please provide a list of your Stewards names and addresses and	or the number of professiona	I registered security	along with the co	ompany's
name, address and registration number.				

name, address and regist	ration number.				
Name:	Д	Address:		Phone:	
Do you require a bar?	Times:	Date(s):		DPS Signature:	
Memorial Hall. They wou	wishing to run the bar themselves ald then be required to obtain a Ten	nporary Event No	otice from Shropshire Co	- ·	yable to Clun
apply:	ou intend to carry out during the	e event. Please t	ompiete an that	Time:	Date:
Recorded / Live Music (
Performance of Play:	Screening of Film:				
Dance (Performance):	Use of Dance Floo				
, ,	freshment (food and /or drinks a				
	watched by an Audience:				
Additiona	ersigned, have read and agree to	o the guidelines	for hire set out in the	a Torms and Con	ditions:
	ersigned, nave read and agree to	o the guidennes	for fife set out in the	e reriiis and Cond	aitions.
Signature:		_			
Print Name:		_			
Date:		_			
Do you have a website link for us to put on ou	for your organisation / event? Plr website.	ease provide a			
Will you have any phot	os after the event? Please can we	e add them to o	ur website?		
Please return this booking form to: Katie Jones, Booking Secretary, Clun Memorial Hall,			Phone: 01588 640109 email: clunmemorialhall@gmail.com		

Katie Jones, Booking Secretary, Clui Guilden Down Lane, Clun SY7 8NY

emaii: ciunmemorialhall@gmawww.clunmemorialhall.co.uk